

# Wisconsin Department of Corrections

Governor Scott Walker | Secretary Jon E. Litscher

## Office of Detention Facilities

December 29, 2017

Sheriff Dale McCullick Crawford County Sheriff's Department 224 N. Beaumont Road Prairie du Chien, WI 53821

**Re: 2017 Jail Inspection** 

Dear Sheriff McCullick:

Pursuant to Wisconsin Statute §301.37(3), an inspection of the Crawford County Jail was conducted on August 16<sup>th</sup>, 2017. The inspection compared the facility to the Department of Corrections Administrative Code Chapter DOC 350, applicable State Statutes, and best correctional practices. The process included a review of records, dialogue with staff and inmates, and a walkthrough of the building to assess the safety, sanitation, adequacy, and fitness of the facility. This correspondence will summarize the findings of the inspection.

# SUMMARY OF FACILITY

The Crawford County Jail was originally constructed in 1896 and has subsequently been remodeled twice. The facility consists of two secure floors and has a maximum rated capacity of 40 adult detainees -24 on the first floor and 16 on the second (verified during the inspection process). The jail is not approved to hold juvenile offenders. On the date of the inspection, there were 34 inmates at the facility.

# INMATE RESOURCES

- **EDUCATION** GED instruction is available to eligible inmates.
- > <u>SUPPORT GROUPS</u> Alcoholics Anonymous (AA) is at the facility on a weekly basis. Reformers Unanimous also meets weekly.
- ➤ <u>LIFE SKILLS PROGRAMMING</u> There is no life skills programming provided at the facility.
- ➤ **RELIGIOUS SERVICES** A nondenominational Bible study is held once a week. Individual consultations can also be facilitated.
- ➤ <u>VISITATION</u> Visitations are held twice a week on Wednesdays and Sundays. Inmates are allowed a 15-minute visit each day (up to five individuals per day) and they are conducted through a non-contact booth.

- <u>COMMISSARY</u> Canteen is provided by Stellar Services and inmates are generally allowed to order weekly.
- **RECREATION** Recreation is limited to dayroom activities.
- ➤ **READING MATERIALS** Reading materials are available twice a week (the facility has an extensive library).



### The following is a list of changes since last year's inspection:

- ➤ Hired Emily Pedley Fecht as a full-time deputy (to replace Lindsey Redman).
- ➤ Various plumbing fixtures were serviced and the Northwest cellblock flooring was repaired.
- > Purchased new inmate clothing.
- ➤ Changed healthcare providers (from Public Health to Advanced Correctional Healthcare). Starting in January 2018, there will be onsite nursing coverage 10 hours per week and a physician's assistant will be at the jail every other week. In light of the change, it is recommended administration review the jail's healthcare policies for any procedural modifications.



### The following is a list of goals for the upcoming year:

- Resurface all dayroom tables.
- > Purchase new uniforms for jail staff.
- > Continue replacing inmate mattresses.
- Explore the use of GPS bracelets for all Huber inmates.

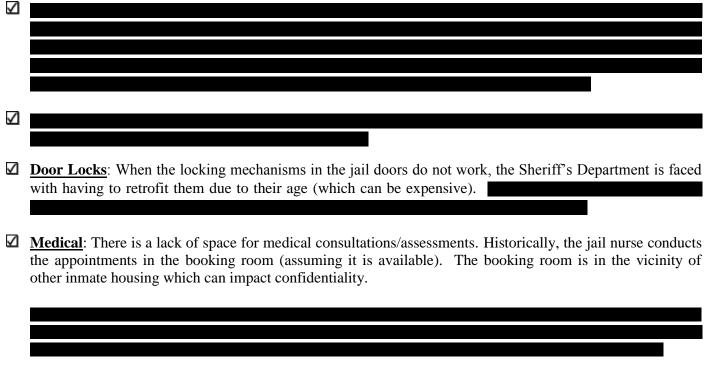
# SUMMARY OF INSPECTION

I met with Crawford County administrative and security personnel to conduct the annual inspection. The site visit included a review of records, dialogue with staff and inmates, and a walkthrough of the detention areas. The attached checklist details my findings as they relate to the Department of Corrections Administrative Code Chapter DOC 350 and applicable State Statutes.

The overall appearance of the jail was in satisfactory condition. There were no significant signs of graffiti or property defacing. A spot check of housing unit conditions and mechanical devices revealed the following issues:

- ☑ The North Central cellblock needed cleaning (addressed subsequent to the inspection).
- The washbasin in cell #1 (Max Right) was broken (addressed subsequent to the inspection).

Inmate feedback regarding conditions of confinement and staff supervision was generally positive (there were no common-themed complaints and I heard positive comments about staff). My observations during the inspection revealed cordial and professional interactions between the staff and inmates. As documented in previous inspections, there are considerable operational challenges due to the facility layout and age of the building. The following details some of those shortfalls:



- Receiving Cells: The facility only has three (3) receiving cells which are used for multiple purposes (e.g. initial booking, special needs, suicide watches, medical observation, disciplines, administrative confinement, etc.). That is not sufficient bed space for all of those needs (nor were those cells designed for long-term housing).
- **Recreation Space**: There are no recreational opportunities outside of the housing unit dayrooms.
- ☑ Storage\Inmate Property Space: This is an ongoing concern, as property is stored in every available area within the jail.
- Facility Fixtures: There are numerous areas throughout the jail that contain furniture/fixtures that are not detention strength (e.g. multipurpose room, booking room, etc.).

Given how antiquated the facility is, jail administration and staff are to be commended for the overall positive climate.



The following violations were documented during this year's inspection process:

- Administrative Code DOC 350.03(6) defines what a "dayroom" is and how it can be used. Contrary to the code, it was reported that there were a few occasions during this inspection period in which an inmate slept on a dayroom floor due to overcrowding. It is recommended a thorough review of the jail's classification system/housing plans is conducted to establish a population threshold which prevents individuals from having to sleep on the floor and ensures the proper separation of inmates by security classification.
- Administrative Code DOC 350.13(5) requires a health appraisal to be completed within 14 days of being booked into the facility. A spot check of records revealed noncompliance, as not all appraisals had been completed within the 14-day requirement.
- Administrative Codes DOC 350.16(7) and DOC 350.16(8) require medications administered to or refused by an inmate shall be documented. A spot check of the medication administration records revealed noncompliance, as several unexplained gaps were observed on the MAR's. Additionally, staff need to ensure the prescriber's name is documented on the MAR.
- Administrative Code DOC 350.17(10) requires certain documentation regarding the actions and decisions of an inmate on a suicide watch. A spot check of records revealed noncompliance, as not all of the procedural requirements were documented in the reports reviewed (sample suicide watch placement forms were provided subsequent to the inspection).
- Administrative Code DOC 350.18(1)(a) requires staff to conduct wellness checks of inmates at staggered intervals not to exceed 60 minutes. A spot check of records revealed noncompliance, as each of the dates reviewed contained wellness checks which exceeded 60 minutes in length. It should be noted inmates reported seeing staff at least once an hour when questioned during the inspection.
- Administrative Code DOC 350.20(2) requires inmates who are housed in the same cell to be of the same security classification. A spot check of records revealed noncompliance, as multiple cells contained mixed classifications of inmates.
- Administrative Code DOC 350.25(3) requires a supervisor to perform documented weekly reviews of an inmate's progress in administrative confinement. A spot check of records revealed noncompliance, as there were inconsistencies with the documentation of weekly reviews.

MISCELLANEOUS ISSUES
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The following issues were also noted during this inspection process:

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- ☑ <u>Healthcare Staff</u> While verification of licensure was on file, not all documents were current.
- ☑ <u>Inmate Counts</u> A spot check of records verified general compliance; however, one of the dates reviewed lacked complete documentation.
- ☑ <u>Staff Training</u> Although not documented, it was reported all jail staff received annual strip search training in accordance with WI Stat. §968.255. As was discussed during the inspection closeout, administration is encouraged to formally document this training.



The Crawford County Jail is approved to hold adult inmates with a rated capacity of 40. This approval is contingent upon correction of the noted violations and the continued compliance with Chapter DOC 350 and applicable State Statutes.

I would like to thank your staff for their assistance and cooperation during the inspection. All of the materials I requested were well prepared and organized. Please do not hesitate to contact my office should you have any questions regarding this report.

Professionally,

Nathan White, Inspector

DEPARTMENT OF CORRECTIONS

Cc: Orrin Olson, Chief Deputy Russell Wittrig, Lieutenant Alisha Merwin, Sergeant Kristi Dietz, ODF File

# **CHAPTER DOC 350 INSPECTION DOCUMENT**

COUNTY: Crawford DATE: 8/16/17					
	IN	M	ATE HOUSING AND CLASSIFICATION	DΝ	
			or substantially remodeled on or after Septe	en	nber 1, 2014, double cells shall have a
floor area o	f at least 25 square feet of unenc	un	bered space per occupant.		
COMPLIAN	CE \	/EF	RIFICATION		
M	leets standard		Policy and procedure manual review		Previous compliance documented
N	eeds improvement		Sample of facility records reviewed		Other (specify):
N	on-compliant		Sight confirmation by inspector		· · · · · · · · · · · · · · · · · · ·
N	ot reviewed		Verbal confirmation by facility staff		
Comments:					
20000	(0) (1) 555 555 55 (1) 1 1 11 11				
			are constructed or substantially remodeled a of at least 70 square feet. NOTE: ODF rec		
			990, a cell shall have a floor area of at least		
COMPLIAN	CF \	/FF	RIFICATION		
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_=_	eeds improvement	H	Sample of facility records reviewed	푹	Other (specify):
_=	on-compliant	H	Sight confirmation by inspector	_	Other (specify).
	ot reviewed	H	Verbal confirmation by facility staff		
		<u></u>	· · · · · · · · · · · · · · · · · · ·		shanguantly been remodeled twice
Comments.	The Clawford County Jan wa	15	originally constructed in 1896 and has	50	absequently been remodeled twice.
DOO 005 00					
			e department, the jail shall have policies and	_	
			hall determine jointly the adequate staffing		
			nd security of the jail staff and inmates wher ed by the representatives of the county boar		
			all remain in effect until rescinded or amend		
county boa			uate staff as agreed upon by the county boa		
occur.					
The written	agreement between the County	Bo	ard and Sheriff is on file with the department	t a	and contains the following elements:
	e County Board and Sheriff agree to				
<ul> <li>The staffing levels include security staff, health care staff, support and service staff and administrative staff</li> </ul>					
<ul> <li>The staffing pattern is detailed in the written agreement</li> <li>The agreement is signed by representatives of the County Board and the Sheriff</li> </ul>					
• Ine	e agreement is signed by represent	atıı	es of the County Board and the Sheriif		
COMPLIAN	CE \	/EF	RIFICATION		
	leets standard	X	Policy and procedure manual review	$\neg$	Previous compliance documented
_=_	eeds improvement		Sample of facility records reviewed	f	Other (specify):
	on-compliant		Sight confirmation by inspector	_	(op-o)/.
	ot reviewed	Ħ	Verbal confirmation by facility staff		
		<u>ب</u>	ole celling. The most recent staffing ag	77/	sement was signed on 12/15/00
Comments.	Tolloy #1100.0 addresses do	Jul	or coming. The most recent stailing ag	ع او	Comonit was signed on 12/15/09.

DOC-2744 (4/2015) DOC 350.20 (2) Inmates housed in the same cell shall have the same custody classification and be properly segregated as required under s. 302.36, Stats. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Verbal confirmation by facility staff Not reviewed Comments: A spot check of records revealed noncompliance, as multiple cells contained mixed classifications of inmates. DOC 350.20 (3) For male and female housing areas, at least one cell or 15% of the jail's total number of cells, whichever is greater, shall be maintained for single occupancy. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: DOC 350.20 (4) Receiving cells may not be used for double occupancy. VERIFICATION COMPLIANCE Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: DOC 350.21 Inmate classification. All jails shall meet the requirements set forth in s. 302.36 Stats. The sheriff shall establish and maintain an objective prisoner classification system to determine prisoner custody status and housing assignment, and develop eligibility criteria for prisoner participation in available work assignments, programs and community service projects. The jail shall have policies and procedures relating to classification. DOC 350.21 (1) Description of the objective prisoner classification system, including the identification and training of staff authorized to classify prisoners, initial classification and reclassification procedures and prisoner appeal process. DOC 350.21 (2) Eligibility criteria for prisoner participation in available work assignments, programs and community service projects. DOC 350.21 (3) Review of prisoner classification decisions. The jail has implemented an objective classification system based on point additive formula or decision tree forced choice or similar formalized mechanism for housing determination. A written policy is provided to all correctional staff detailing classification process. Policy clearly identifies personnel authorized to classify inmate housing assignments. Personnel assigned to complete inmate classification assignment receive formal training. A process is in place for supervising personnel to complete a secondary review of reclassification and appeals. Sufficient housing exists to meet classification guidelines to male and female inmates. Inmates housed in the same cell shall have the same security classification and be properly segregated as required in s. 302.36 Stats. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Verbal confirmation by facility staff Not reviewed Comments: Policy series #508 addresses inmate classification. An objective classification instrument is utilized through

the jail's computer management system (classification records were observed). Two staff are designated to complete

primary classifications and reviews.

Given the facility layout and limited bed space, there are ongoing challenges with the proper separation of inmates by classification (especially females). As a reminder, inmates housed in the same cell or in a dormitory must have the same security classification.

### SAFETY AND SECURITY PRACTICES

DOC 350.18 Security. The jail shall have policies and procedures relating to jail security.

- Portable communications and alarm systems are in good working condition
- Intercom and emergency notification devices are in good working order

shall	provide that all inmates are persona minutes (b) 15 minutes for inmate	ly observed by jail security staff a		
:	All inmates are personally observed In housing units of multiple cells, of	during each physical inspection. cers are encouraged to complete physical	sical inspections	s from within the housing unit.
	350.18 (2) Supplemental observations.	. A video monitoring system may	be used to sup	plement but not replace personal
	350.18 (3) Documentation. Each ob			
COM	PLIANCE	VERIFICATION		1
	Meets standard	Policy and procedure manual		Previous compliance documented
	Needs improvement	Sample of facility records revi		Other (specify):
	•	Sight confirmation by inspector		
	Not reviewed nents: Policies #504.2, #504.3, #	Verbal confirmation by facility		
*A sp  DOC: docui  COMF	pess checks which exceeded 60 a questioned during the inspection of check of records for suicide as 350.18 (4) Inmate counts. Description of the counts of t	minutes. It should be noted on.  vatches verified compliance.  on of the system for physically couvith a minimum of one count per size.  VERIFICATION  Policy and procedure manual  Sample of facility records revious Sight confirmation by inspectod Verbal confirmation by facility	nting inmates. hift.  review ewed or staff	each of the dates reviewed contained ted seeing staff at least once an hour  Formal counts shall be completed and  Previous compliance documented  Other (specify):
of the	e dates reviewed lacked comple 350.18 (5) Security inspections. De	criptions of procedures for condu		ed general compliance; however, one menting facility and area searches.
•	Facility and area searches are com			
	PLIANCE	VERIFICATION	. –	
		Policy and procedure manual		Previous compliance documented
	Needs improvement	Sample of facility records revi		Other (specify):
- 1				
	Non-compliant Not reviewed	Sight confirmation by inspector  Verbal confirmation by facility		

Comments: Policies #513.7, #513.8, and #523.1 address facility searches. A spot check of records verified compliance.

DOC-2744 (4/2015) DOC 350.18 (6) Inmate searches. Descriptions of procedures for conducting and documenting inmate pat down, strip and body cavity searches. **COMPLIANCE VERIFICATION** Meets standard Previous compliance documented Policy and procedure manual review Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Policies #513.3, #513.4, and #523 address inmate searches. Although not documented, it was reported all jail staff received annual strip search training in accordance with WI Stat. §968.255. As was discussed during the inspection closeout, administration is encouraged to formally document this training. DOC 350.18 (7) Door and lock inspections. Monthly inspections shall be made to determine if all jail doors and locks within and to the secure perimeter of the facility are in good working order. Each inspection shall be documented. The remote security controls of doors and locks are all operable. All manufacturing doors, locks and releases are repaired in a timely manner. The jail staff demonstrate a proficiency in operating all locks, doors and releases. COMPLIANCE **VERIFICATION** Policy and procedure manual review Meets standard Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #211.2.3 addresses door and lock inspections. A spot check of records verified general compliance: DOC 350.18 (8) Key control. Control and use of jail keys, including all of the following: (a) All issued keys shall be inventoried and accounted for at shift change All keys shall be stored in a secure area and accessible in the event of an emergency Inmate are not permitted to handle or utilize jail keys. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #211.2.1 addresses key control. Staff become familiar with key use and storage during orientation and jail training. Per policy, all keys are accounted for at shift change. DOC 350.18 (9) Weapons control. Introduction, availability, control, inventory, storage and use of firearms, chemical agents, electronic control devices or other related security devices and specification of the level of authority required for their access and use. **COMPLIANCE VERIFICATION** Policy and procedure manual review Previous compliance documented Meets standard Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector

Verbal confirmation by facility staff Comments: Policy series #507 addresses weapons control. Lock boxes are located at the entrances to the facility.

Not reviewed

טטט	-2744 (4/2015)						
DOC 3		Int	roduction, availability, control, inventory, st	orage and use of tools and sharps within			
•	Documentation of the control and inve	nto	ry is maintained				
COMF	PLIANCE \	/EF	RIFICATION				
$\square$	Meets standard	$\boxtimes$	Policy and procedure manual review	Previous compliance documented			
	Needs improvement	$\boxtimes$	Sample of facility records reviewed	Other (specify):			
	Non-compliant		Sight confirmation by inspector				
	Not reviewed		Verbal confirmation by facility staff				
Comm	nents: Policy series #205 and #507	ac	ddress tool control.				
DOC 3	350.19 (2) Each jail shall develop a fire the following:  Local fire department inspection requires Fire protection equipment location and	sa em	aintenance. Each jail shall have and shall prop	erly maintain fire alarms, smoke and thermal			
,	detectors, fire extinguishers and self-contained breathing apparatuses which operate for at least 30 minutes.  Fire extinguishers are properly maintained with recorded time and date of inspection.  Fire extinguishers are properly placed, secured and easily accessible to staff.  A fire extinguisher suitable for grease fires is provided in the kitchen.  Jail staff can demonstrate proficiency in the use of fire protection equipment.  Training of staff in equipment use and the evacuation of inmates  Staff training is documented.  A written evacuation plan  Jail staff can articulate or demonstrate the evacuation routes and policies of the jail.						
COMF	PLIANCE \	/EF	RIFICATION				
	Meets standard	X	Policy and procedure manual review	Previous compliance documented			
	Needs improvement		Sample of facility records reviewed	Other (specify):			
	Non-compliant	$\overline{\boxtimes}$	Sight confirmation by inspector				
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff				
Comm	nents: Policies #402 and #404 add	dre	ess fire safety. Fire extinguishers and	I SCBA's were observed in the facility			
			•	tinguisher tags verified they are being			
	ced regularly.						
	350.19 (3) The evacuation route develor for jail staff in the jail.	ppe	d as part of the evacuation plan under sub.	(2)(d) shall be posted in a conspicuous			
COMF	PLIANCE \	/EF	RIFICATION				
	Meets standard	$\boxtimes$	Policy and procedure manual review	Previous compliance documented			
	Needs improvement		Sample of facility records reviewed	Other (specify):			
	Non-compliant	$\boxtimes$	Sight confirmation by inspector				
	Not reviewed		Verbal confirmation by facility staff				
Comm	nents: Evacuation routes were obse	erv	ed during the inspection.				
	350.19 (4) Fire safety evacuation and c ns. Each practice or simulation shall b		er procedures shall be practiced or simulate locumented.	d by all jail staff at least once every 12			
COMF	PLIANCE \	/EF	RIFICATION				
	Meets standard	$\boxtimes$	Policy and procedure manual review	Previous compliance documented			
	Needs improvement	$\boxtimes$	Sample of facility records reviewed	Other (specify):			
	Non-compliant		Sight confirmation by inspector				
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff				
Comm	nents: A review of records verified	sta	ff received fire safety training during th	is inspection period.			

		50.19 (5) The facility shall be inspected ined.	ed k	by the local fire department at least once ev	/er	y 12 months and a record thereof shall be
		The fire inspection report supports	s tha	at the facility conforms to applicable fire safety	cc c	odes.
COI	MPI	_IANCE \	/ER	IFICATION		
	X	Meets standard	X	Policy and procedure manual review		Previous compliance documented
	Ť	Needs improvement	$\overline{\overline{A}}$	Sample of facility records reviewed	ಠ	Other (specify):
Ī	Ħ	Non-compliant		Sight confirmation by inspector		
Ī	╗	Not reviewed	Ī	Verbal confirmation by facility staff		
DO	C 3	50.19 (6) There shall be monthly inspe		rairie du Chien Fire Department on 7/		
		tions shall be documented.		WEIGHT AT IN IN		
			/ER	RIFICATION	_	
	<u> </u>	Meets standard	$\frac{\times}{2}$	Policy and procedure manual review	<u> </u>	Previous compliance documented
	<u> </u>	Needs improvement	<u> </u>	Sample of facility records reviewed		Other (specify):
	<u> </u>	Non-compliant		Sight confirmation by inspector		
L		Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
DO0 prev	C 35 ven ate	50.22 (1) Jail staff may use physical for the staff me	orc emb	olicies and procedures for the use of force e against an inmate only if force is necessater, the inmate or someone else, unlawful dount of force reasonably necessary to achi	ary Ian	nage to property, or the escape of an
COI	MPI	LIANCE V	/ER	RIFICATION		
	$\boxtimes$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
		Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
		Non-compliant		Sight confirmation by inspector		
	Not reviewed Verbal confirmation by facility staff					
DO0 adm	C 3	visory review was observed).  50.22 (2) Any staff member who has ustrator or the staff member's supervis	ıse sor	d force to control an inmate or inmates sha describing the incident. The report shall in vise authorized by the sheriff or sheriff's de	all s	submit a written report to the sheriff, jail ude all known relevant facts and be
		Supervisory review is conducted a	and	documented.	<b>3</b> 51	gnee.
			_	RIFICATION		B :
	<u>×</u>	Meets standard	$\frac{\square}{\square}$	Policy and procedure manual review	<u>Ц</u>	Previous compliance documented
Ļ	<u> </u>	Needs improvement	<u>×</u>	Sample of facility records reviewed		Other (specify):
	<u> </u>	Non-compliant	Ц	Sight confirmation by inspector		
		Not reviewed		Verbal confirmation by facility staff		

Comments:

DOC 350.23 Use of restraints. The jail shall have policies and procedures governing the use of restraints and control devices.

DOC 350.23 (1) Restraint devices are never used as punishment and are not applied longer than necessary.

Inventories are conducted and documented.

DOC 350.23 (2) When an inmate is mechanically restrained for non-routine purposes, a written report must be completed by the end of the shift, unless otherwise authorized by the sheriff or sheriff's designee. Documentation shall include the reason for use, duration of use and corresponding wellness checks.

Supervisory review is conducted and documented

COMPLIANCE		VERIFICATION			
$\boxtimes$	Meets standard	$\boxtimes$	Policy and procedure manual review	$\boxtimes$	Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		

Comments: Policy #512 addresses use of restraints. As was discussed during the closeout, staff are reminded to be as thorough as possible when documenting restraint chair use (e.g. exact time in/out, supervisory review/approval, wellness checks, circulatory checks, medical/mental health staff checks, provision of medications, offering of water/food, offering of bathroom breaks, etc.). Sample forms were provided subsequent to the inspection.

Office of Detention Facilities DOC-2744 (4/2015)

DOC 350.24 Discipline. The jail shall have policies and procedures outlining inmate discipline and due process.

DOC 350.24 (1) Inmates rules of behavior. Every jail shall have written rules of behavior for inmates. At the time of admission, each person shall be notified verbally of the existence of jail rules for inmate behavior and the potential disciplinary actions for violations of the rules. Each inmate shall be provided with a copy of the jail rules or copies of the rules shall be posted in conspicuous places in the jail.

#### DOC 305.24 (2) Discipline for minor violation. (See code for specific language.)

- (a) A minor discipline is a verbal or written reprimand, restriction of privileges or placement in disciplinary segregation for 24 hours or less.
- (b) Inmate is informed of violation, potential discipline and disciplinary procedures for minor violations.
- (c) Inmate has opportunity to make verbal statement about alleged violation to a staff member
- (d) Staff member may impose a minor discipline if found that violation occurred
- (e) Supervisor is informed of incident by staff member. If supervisor concludes violation is major, then it shall be handled in accordance with Sub. (3). If supervisor finds that no violation occurred, the inmate shall be notified that the charge has been dismissed.
- (f) Inmate is notified of right to appeal and of appeal procedure.
- (g) Information made part of inmate's file. If supervisor finds no violation occurred, the due process records shall reflect those findings.

#### DOC350.24 (3) Discipline for major violation. (See code for specific language.)

- (a) A major discipline is restriction of privileges for more than 24 hours, placement in solitary confinement for more than 24 hours in accordance with s. 302.40, Stats., loss of good time in accordance with s. 302.43, Stats., restrictions affecting Huber law privileges in accordance s. 303.08, Stats., or restrictions affecting work release in accordance with s. 303.065, Stats.
- (b) Written report to supervisor within 24 hours of incident
- (c) Inmate notification of charges and right to hearing 24 hours in advance of hearing.
- (d) Due process hearing within seven calendar days, unless inmate waives the right to a due process hearing.
  - 1. Impartial hearing officer or committee (not involved in incident)
  - 2. Inmate's right to be present at hearing, make a statement and present evidence. Reason for inmate's absence documented.
  - 3. Inmate's right to present witnesses. Reason for absence of witness documented.
  - 4. Inmate's right to staff advocate if inmate is illiterate or if issues are complex.
  - 5. Hearing officer may consider inmate's mental illness, developmental disability or other emotional or mental disability as a mitigating factor in imposing discipline.
  - 6. Written decision stating discipline administered. Copy to inmate.
  - 7. Inmate is notified of right to appeal and appeal procedure
  - 8. Incident information, discipline administered and decision shall be made part of inmate file. If found no violation occurred, the due process records shall reflect those findings.
- e) If inmate waives right to a due process hearing, violation shall be disposed of in accordance with procedures for minor violations. Major discipline may be imposed if relevant staff member finds a violation occurred. Waiver does not constitute an admission of the alleged violation.

#### 350.24(4) Classification.

(a) An inmate may be evaluated for custody classification following the imposition of discipline.

COMPLIANCE	VERIFICATION			
Meets standard	Policy and procedure manual review	Previous compliance documented		
Needs improvement	Sample of facility records reviewed	Other (specify):		
Non-compliant	Sight confirmation by inspector			
Not reviewed	Verbal confirmation by facility staff			

Comments: Policy series #600 addresses due process. A spot check of minor and major disciplines verified compliance (documentation of a supervisory review was observed).

#### **HEALTH CARE**

DOC 350.13 Inmate health screening. The jail shall have policies and procedures for inmate health screening.

DOC 350.13 (1) Use of a health screening form that is developed in conjunction with health care professionals and is used at booking with each inmate to record information about medical, mental health and dental conditions, physical and developmental disabilities, alcohol or other drug abuse problems and suicide risk.

DOC 350.13 (2) Referrals to medical, mental health or supervisory staff in a timely manner in response to identified concerns. If urgent concerns are identified, the referral shall be immediate.

DOC 350.13 (3) Review of the health screening form by health care or other designated staff within 72 hours if non-urgent concerns are identified.

Review by health care provider is conducted and documented.

DOC 350.13 (4) Documentation of health screening results and subsequent review of the health screening form in an inmate's confidential file.

- Health screening forms are legible, accurate and complete, including detailed narratives when necessary.
- Health care professionals provided input into the content of the health screening form.
- The health screening form contains usable information relating to the inmate's medical condition, dental condition, medical disabilities, developmental disabilities, alcohol and other drug abuse and suicide risk.
- A health screening form is completed for each inmate booked into the facility.
- The health screening forms are reviewed for completeness, accuracy, legibility and the appropriateness of the decisions made regarding referral, housing, classification and other actions.
- The identity of the person completing the health screening form is documented

The lactimy of the percent con	produing the median ecoesting form to decounterness.				
COMPLIANCE	VERIFICATION				
Meets standard	Policy and procedure manual review Previous compliance documented				
Needs improvement	Sample of facility records reviewed Other (specify):				
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
	712 address intake screenings. A health screening form is completed for inmates medical and mental health screening forms were observed in individual medical files).				
ompleted by health care staff within	OC 350.13 (5) A health appraisal that is to be completed within 14 days after arrival at the facility unless a health appraisal has been ompleted by health care staff within the previous 90 days. The health appraisal shall be completed by health care staff in accordance ith protocols established by the responsible physician.				
COMPLIANCE	VERIFICATION				
Meets standard	Policy and procedure manual review Previous compliance documented				
Needs improvement	Sample of facility records reviewed Other (specify):				
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
omments: Policies #700, #708, #710, and #712 address health appraisals. A spot check of records revealed oncompliance, as not all appraisals were completed within the 14-day requirement.					
OC 350.14 Inmate health care. There shall be sufficient equipment, material, space and supplies for the performance of health care ervices in a confidential manner.					
OMDI IANICE	VEDICION				

Comments: As noted in previous inspections, there is a lack of space for medical consultations/assessments. Historically, the jail nurse conducts the appointments in the booking room (assuming it is available). The booking room is in the vicinity of other inmate housing which can impact confidentiality.

Policy and procedure manual review

Sample of facility records reviewed

Sight confirmation by inspector Verbal confirmation by facility staff

Meets standard

Non-compliant

Not reviewed

Needs improvement

Previous compliance documented

Other (specify):

	or secure necessary medical and mental health t	reatment and emergency dental care for			
inmates in custody.					
<ul> <li>Jail provides a specific form for inm</li> </ul>	ates to request medical assessment or treatment.				
All inmate requests for medical care					
•	ical requests are documented by health care staff m	embers.			
COMPLIANCE	VERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement		Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments:					
DOC 350 14 (3) Health care staff shall be	in compliance with state and federal licensure of	ertification and registration. Verification of			
compliance shall be maintained at the fac		crimoanon and registration. Vermoanon or			
COMPLIANCE	VERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector	= (-1( )/			
Not reviewed	Verbal confirmation by facility staff				
Comments: While verification of licens	ure was on file, not all documents were cu	rent			
Commence Trans Tormeation of moorie	are trae errine, her air decamente trere ea				
DOC 350 14 (4) Medical records shall be	kept separate from other records and shall be m	sintained in a confidential manner in			
	ats., and any other applicable state or federal lav				
	,				
<ul> <li>Medical record accessibility is limited</li> </ul>	ed to medical staff, the jail administrator and the adm	inistrator's designees as appropriate.			
COMPLIANCE	VERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Policy #726 addresses medical records. Medical records are securely stored within the jail office.					
•		•			
DOC 350.44 (C) Officers shall receive do	numerated annual training on boolth care noticing	and massadones modications and bookly			
screening at the time of admission.	cumented annual training on health care policies	and procedures, medications and health			
•					
COMPLIANCE	VERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: A spot check of training re	cords verified compliance.				
	-				

DOC 350.15 Health care policy. The jail shall have policies and procedures for inmate health care.					
DOC 350.15 (1) Documentation of health refer	rals made or health care provided.				
DOC 350.15 (2) Maintenance of documents in	an inmate's confidential file.				
COMPLIANCE VE	RIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Chapter #7 addresses health of	care policies and procedures.				
DOC 350.15 (3) Names, addresses and telephoemergency and routine health care services for a Contact information is available to staff.		cies who have agreed to provide			
	RIFICATION				
Meets standard		Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments:					
<ul> <li>DOC 350.15 (4) Referral of an inmate to jail he</li> <li>Health care referrals are made and docu</li> <li>Staff are knowledgeable about the health</li> <li>COMPLIANCE</li> </ul>	mented.	e health care.			
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments:					
DOC 350.15 (5) Designation of staff who have authority to make health care decisions, including emergency medical and dental care.  DOC 350.15 (6) Non-emergency health care, including the use of an inmate's personal physician.					
	RIFICATION				
Meets standard	, ,	Previous compliance documented			
Needs improvement		Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed Verbal confirmation by facility staff					
Comments:					

DOC-2	2744 (4/2015)				
DOC 3	50.15 (7) Schedule of inmate access	to	outine medical care.		
	list, or other appropriate means.		al care is provided to inmates in writing via har		ook, posted notice, inmate rule and regulation able to read or write.
COMPI	LIANCE	VE	RIFICATION		
	Meets standard	X	Policy and procedure manual review		Previous compliance documented
	Needs improvement	X	Sample of facility records reviewed		Other (specify):
	Non-compliant	$\times$	Sight confirmation by inspector		
	Not reviewed	$\times$	Verbal confirmation by facility staff		
and A be 10	dvanced Correctional Healthcar hours per week and a physic	e v ciar	vill be providing coverage starting in	Jar her	ever, there has been a recent change nuary 2018. Onsite nursing hours will week. In light of the change, it is ral modifications.
DOC 3	50.15 (8) Provision for inmates with	chr	onic medical conditions.		
COMPI	LIANCE	VE	RIFICATION		
	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
DOC 3	Inmate medical requests are docume	nted	ate medical requests on a daily basis.  If on an official medical request form, re retained in inmate's confidential medical file	Э.	
COMPI	<u> </u>		RIFICATION		
	Meets standard	$\nabla$	Policy and procedure manual review	Т	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	-	Other (specify):
	Non-compliant		Sight confirmation by inspector	_	Ctrici (specify).
一百	Not reviewed	X	Verbal confirmation by facility staff		
Comme	ents: Completed requests were o		• •		
	ng emergency services.		e's confidential medical file of any referra		nd identification of the services provided, ical file.
	LIANCE	VEI	RIFICATION		
	Meets standard	X	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comme	ents:				

Office of Detention Facilities DOC-2744 (4/2015)

DOC 350.15 (11	) Provision of s	pecial diet if ordered by	y a qualified health care	professional
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- Special diets ordered by a qualified health care professional are documented in the inmate's confidential medical file.
- The jail health care providers, food service providers, and correctional staff are notified of special diets ordered by a qualified health care professional.

COMPLIA	ANCE	VERIFICATION
$\boxtimes$	Meets standard	Policy and procedure manual review Previous compliance documented
	Needs improvement	Sample of facility records reviewed Other (specify):
	Non-compliant	Sight confirmation by inspector
	Not reviewed	∀erbal confirmation by facility staff
	·	

Comments: Alleged food allergies and medical diets are reviewed by the health authority. Ordered medical diets are communicated with the food service provider.

DOC 350.15 (12) Pregnancy management.					
COMPLIA	ANCE	VEF	RIFICATION		
$\square$	Meets standard	$\boxtimes$	Policy and procedure manual review	Previous compliance documented	
	Needs improvement		Sample of facility records reviewed	Other (specify):	
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Common	to:				

#### Comments:

DOC 350.15 (13) Maintenance of agreements between the jail and providers of health care services.				
COMPLIANCE	VERIFICATION			
Meets standard	Policy and procedure manual review Previous compliance documented			
Needs improvement	Sample of facility records reviewed Other (specify):			
Non-compliant	Sight confirmation by inspector			
Not reviewed	Verbal confirmation by facility staff			

#### Comments:

DOC 350.15 (14) Use of health transfer summary form under s. 302.388 (2), Stats.

Wisconsin State Statute 302.388 Prisoner medical records.

### (2) HEALTH SUMMARY FORM.

- The department shall provide each jailer a standardized form for recording the medical conditions and history of prisoners being transferred to the department or another county's jail. Except as provided in pars. (b) and (bm), jail medical staff shall complete the form and provide it to the receiving institution intake staff at the time of each such transfer.
- (b) If the jail does not have medical staff on duty at the time of a transfer, the jailer or his or her designee shall complete as much of the form as possible and provide it to the receiving institution intake staff at the time of the transfer. The jailer shall ensure that all of the following occur within 24 hours after the transfer.
  - The jail medical staff, the prisoner's health care provider or, if the prisoner does not have a health care provider, a health care provider under contract with the jail reviews the form provided to the receiving institution at the time of the transfer.
  - The medical staff or health care provider reviewing the form corrects any errors in the form and includes in it any additional available information.
  - 3 The medical staff or health care provider reviewing the form transmits the updated form or the information included on the form by the quickest available means to the receiving institution intake staff.
- (bm) Jail medical staff need not complete the form if the jailer or his or her designee provides a copy of the prisoner's complete medical file to the receiving institution intake staff at the time of the transfer.
- (f) Receiving institution intake staff may make a health summary form available to any of the following:
  - 1. The prison's or jail's medical staff.
  - 2. A prisoner's healthcare provider.
  - 3. In the case of a prison or jail that does not have medical staff on duty at the time of the transfer, a health care provider designated by the department or the jailer to review health summary forms.
  - In the case of a jail that does not have medical staff, a person designated by the jailer to maintain prisoner medical records.

DOC	C-2744 (4/2015)				
COMF	PLIANCE	VER	IFICATION		
$\boxtimes$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
filling	g out the form and attaching and of time). Completed HTS v	a compl vere obs	ete copy of the medical file (unless served in individual medical files.	s the	rity staff are generally responsible for e nurse is made aware of the transfer
infect (a (b	tion control shall contain all of the a) Provision of treatment and supervol Documentation of the need for isco Provision of laboratory screening to	e following ision of including the state of	ng components:  mates during isolation or quarantine under quarantine under s. 252.06(6)(b), Stats., in	s. 28 the in	nmate's confidential medical file. able disease if ordered by medical personnel.
COMF	PLIANCE	VER	IFICATION		
$\square$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comn	nents: Policy #714 addresses	commur	nicable disease.		
•	350.15 (16) Detoxification and ma  Appropriate housing and supervi  PLIANCE	sion is pr			
$\boxtimes$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Comn	nents:				
and a	dministration of prescription and	non-presprofessi			procedures relating to the control, delivery reatments.
		$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	늗	Other (specify):
	Non-compliant		Sight confirmation by inspector		J Other (specify).
	Not reviewed		Verbal confirmation by fracility staff		
Comn	nents: Policy #730 addresses i	nmate r			
docui	mented training shall be provided	to jail st	aff that deliver medications.	es of	medication at prescribed times. Annual
COM	PLIANCE  Meets standard		Policy and procedure manual review		Dravious compliance decumented
$- \stackrel{\frown}{\vdash}$	Meets standard Needs improvement		Policy and procedure manual review  Sample of facility records reviewed	<del>-</del>	Previous compliance documented  Other (specify):
_ <del> </del>		$- \stackrel{\triangle}{\vdash}$	Sight confirmation by inspector		Other (specify):
<del></del>	Non-compliant Not reviewed				
	Not reviewed		Verbal confirmation by facility staff		
					delivery of medications to inmates of records verified staff received the

aforementioned training during this inspection period.

DOC 35		riate p	ersonnel that all medications brought in b	y i	nmates or other persons for an inmate are
	Verification of prescription medication	on is p	erformed by a health care provider or an appr	ropi	riately trained designee.
COMPL	IANCE	VER	IFICATION		
	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	$\overline{\square}$	Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
					n of medications brought into the jail.
	50.16 (5) Any medications kept at to	<b>he jai</b> l makes n are l	kept in a separate, medical refrigerator, unless	hat	is not accessible to inmates.
COMPL	IANCE	VER	IFICATION		
$\overline{\boxtimes}$	Meets standard	$\boxtimes$	Policy and procedure manual review	П	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Ħ	Other (specify):
	Non-compliant	X	Sight confirmation by inspector		Cario: (opcon)):
一片	Not reviewed	X	Verbal confirmation by facility staff		
Comme	nts:				
DOC 35		-	escription and nonprescription medication ations are listed in the current policy and proc		
COMPL	IANCE	VER	IFICATION		
	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Comme	nts:				

DOC 350.16 (7) Medication administered or delivered to an inmate shall be documented, including who prescribed the medication, who administered or delivered the medication, and the date and time of administration or delivery.

DOC 350.16 (8) All refusals of recommended or prescribed medications by an inmate shall be documented. A health care professional shall monitor the inmate in accordance with requirements of s. 302.384, Stats.

- All medication documentation is complete, accurate, and legible.
- The name of the pharmacist or qualified health care professional, the full (not abbreviated) name of the medication, the dosage and frequency, the date and time of administration or delivery, and any special instructions or comments are documented for each prescription medication.
- The medication administration and delivery records are reviewed by the health care provider and/or jail administrator or designee for completeness, accuracy, and legibility.

•	<ul> <li>There are no unexplained gaps in</li> </ul>		umentation and inmate refusals of medication	are clearly indicated and documented.
СОМ	IPLIANCE	VER	IFICATION	
	Meets standard	$\boxtimes$	Policy and procedure manual review	Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed	Other (specify):
$\geq$	Non-compliant		Sight confirmation by inspector	
	Not reviewed		Verbal confirmation by facility staff	
			Iministration records revealed nonco y, staff need to ensure the prescriber	mpliance, as several unexplained gaps s name is documented on the MAR.
	The return of an inmate's medicat Unused medication is disposed of Established protocols regarding the	of unuse ion is do f by a he ne dispos	ed medications upon the inmate's release	e, or returned to a pharmacy. presence, are followed.
COM	IPLIANCE	VER	IFICATION	
$\overline{X}$	Meets standard	$\square$	Policy and procedure manual review	Previous compliance documented
Ē	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	(cpcc)/
	Not reviewed		Verbal confirmation by facility staff	
Comr	ments:		, ,	
			HIGH RISK SUPERVISION	
	350.17 Suicide prevention. The jable at risk of seriously injuring then			the supervision and housing of inmates who
СОМ	IPLIANCE	VER	IFICATION	
$\triangleright$	Meets standard	$\boxtimes$	Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed		Verbal confirmation by facility staff	
Comr	ments: Policy #721 addresses s	uicide	prevention.	
	350.17 (1) Obtaining documented de or self-harm.	d inforn	nation from the arresting or transporting	agency to assess an inmate's potential for
СОМ	IPLIANCE	VER	IFICATION	
$\boxtimes$	Meets standard	$\boxtimes$	Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
Ī	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff	

Comments: Documented using the 'Arresting Officer's General Observation of Arrestee' form.

DOC 350.17 (2) Intake screening of inmates that includes interview items and staff observation related to potential suicide risk.

- Intake screening is performed on each new inmate.
- The answers to all screening questions are documented.
- The screening form is legible, accurate, and complete, including detailed narratives when necessary.

	Medical or mental health care pro A secondary security review of int	fessiona take scre	I and answers recorded, when suicide risk is in ils review intake screening reports when risk is sening reports for completeness, accuracy, leg ation and risk assessments is conducted.	s ir	ndicated.
COMP	LIANCE	VER	IFICATION		
$\boxtimes$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
	ents: As a part of the intake were observed in individual r		· ·	а	are asked of each inmate (completed
	Immediate notification to designation of housing areas and	e all of to ted supe I security		de uic	ide watch.
COMP	LIANCE	VER	IFICATION		
$\boxtimes$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
Ī	Needs improvement		Sample of facility records reviewed	ī	Other (specify):
Ī	Non-compliant		Sight confirmation by inspector		
一百	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
	·		tch are generally housed in a receivin		
COMP	LIANCE	VER	IFICATION		
$\square$	Meets standard	$\square$	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
Comm	ents: Mental health services a	re coor	dinated through Crawford County Hur	ma	an Services (on an as needed basis).
	e watch. Assessment by a qualifi	ed ment	I health professionals within 12 hours of particular professional shall be completed a alified mental health professional are documental health professional heal	as	·
COMP	LIANCE	VER	IFICATION		
$\boxtimes$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		· • • • • • • • • • • • • • • • • • • •
	Not reviewed		Verbal confirmation by facility staff		
Comm	ents:				

	60.17 (6) Identification of qualified nafter an on-site face-to-face assessm		tal health professionals who are authorized	d to	o remove an inmate from a suicide watch
COMPL	IANCE	/ER	RIFICATION		
$\square$	Meets standard	$\boxtimes$	Policy and procedure manual review	$\neg$	Previous compliance documented
	Needs improvement	Ħ	Sample of facility records reviewed	Ħ	Other (specify):
一百	Non-compliant	靣	Sight confirmation by inspector		
一百	Not reviewed	Ħ	Verbal confirmation by facility staff		
Comme	nts:		· ·		
DOC 35 suicide	watch.  A clear and reliable means of communis utilized.	nica adm	between health care and jail personnel retaining information between correctional staff mentionistration, and medical/mental health care proven, and actions taken.	nbe	ers regarding inmates who are suicide risks
COMPL	•		RIFICATION		
	Meets standard	$\square$	Policy and procedure manual review	$\neg$	Previous compliance documented
	Needs improvement	$\frac{\bowtie}{}$	Sample of facility records reviewed	╡	Other (specify):
+	Non-compliant	+	Sight confirmation by inspector		Other (specify).
-H	Not reviewed	$\frac{\sqcup}{\boxtimes}$	Verbal confirmation by inspector  Verbal confirmation by facility staff		
DOC 35	Staff demonstrate a working knowledg Staff are familiar with the location and Staff received training on emergency	je o effe esp	apparent suicide attempt, including life-sure first aid and emergency response measures. Extive use of emergency response equipment. Honse, including use of emergency response extensions or suicide threat are documented.	quip	
COMPL	IANCE	/ER	IFICATION		
	Meets standard	$\boxtimes$	Policy and procedure manual review	X	Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant	$\overline{\boxtimes}$	Sight confirmation by inspector		
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
where	they are located).		nt and cutdown tools are maintained		
COMPL	IANCE	/ER	RIFICATION		
	Meets standard	$\square$	Policy and procedure manual review	$\neg$	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	╡	Other (specify):
<del>     </del>	Non-compliant	+	Sight confirmation by inspector		Other (apecity).
<del>-  -</del>	Not reviewed	H	Verbal confirmation by facility staff		
Comme		<u></u>	The second secon		

DOC-2	2744 (4/2015)				
DOC 3	50.17 (10) Documentation of actions	s and	d decisions regarding inmates who are suic	cide	e risks, including all of the following:
(b) (c) (d) (e) (f)	Individual initiating the suicide watch. Date and time watch was initiated. Reason watch was initiated. Name of supervisor contacted. Date and time supervisor contacted. Name, date, and time of referral to me Written documentation from the mental Supervisory review of the relevant	al he	alth professional removing an inmate from a s	uici	ide watch including name, date and time.
COMPL	IANCE	VEF	RIFICATION		
	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
$\square$	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
DOC 35	ction).  50.17 (11) Implementation of 2 hour		·		s were provided subsequent to the suicide prevention and identification of risk
factors	3.				
	LIANCE	VEF	RIFICATION		
	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\underline{\boxtimes}$	Sample of facility records reviewed		Other (specify):
<u></u> _	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Comme	ents: A spot check of records ve	rified	d staff received annual suicide prevent	tio	n training.
DOC 3	50.17 (12) Access by staff to debrie	fing	and support services.		
COMPL	IANCE	VEF	RIFICATION		
$\boxtimes$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comme	ents:				
	. , .	eratio	onal review following a suicide or significar	nt s	uicide attempt.
	LIANCE	VEF	RIFICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		

Comments:

DOC 350.25 Administrative confinement. In this section, "administrative confinement" means a non-punitive, segregated confinement of an inmate in his or her cell or other designated area to ensure personal safety and security within the jail. The jail shall have

policies and procedures outlining the administrative confinement proces.

	350.25 (1) An inmate may be plass one of the following:	aced in a	dministrative confinement if the inmate	's cor	ntinued presence in the general population
(b	a) Presents a substantial risk of phy b) Threatens the security and order c) Inhibits a pending disciplinary inv	of the jail		<i>1</i> .	
COMF	PLIANCE	VEF	RIFICATION		
$\boxtimes$	Meets standard	$\boxtimes$	Policy and procedure manual review	$\neg \vdash$	Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
Ī	Non-compliant		Sight confirmation by inspector		g cure. (opeony).
一百	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
Comm	nents: Policy #505 addresses	adminis	trative confinement.		
an inr super place	mate and the supervisor shall de visor, a jail staff member may p ment decision within 24 hours. T	etermine place an his revie	whether to place the inmate in administinmate in administrative confinement. we shall include evaluation of inmate's continuate of inmate's continuate.	trative The s	may require administrative confinement of e confinement. In the absence of his or her taff member's supervisor shall review that ication.
	PLIANCE		RIFICATION		1
		$\underline{\qquad}$	Policy and procedure manual review	<u> </u>	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	L	Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
The s		the inma	ate no longer presents a threat to the s		supervisor at least once every seven days., security and order of the jail and may be
COMF	PLIANCE	VEF	RIFICATION		
	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed		Other (specify):
$\boxtimes$	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
	nents: A spot check of record kly supervisory reviews.	s revea	led noncompliance, as there were	inco	nsistencies with the documentation of
	nistrative confinement shall be d	ocumento			he length of time the inmate remains in nement.
	PLIANCE	VEF	RIFICATION		
$\boxtimes$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comm	nents:				

Previous compliance documented

#### RECORDS AND REPORTING

DOC 350.10 Records and reporting.

Meets standard

DOC 350.10 (1) Register of inmates. Each jail shall keep a register of all inmates. The register shall contain identifying information on each inmate, including name, residence, age, sex, race, court order, time and cause of placement and placing authority, and time of release and releasing authority. If an inmate escapes, the time and manner of the escape shall be recorded in the register.

Policy and procedure manual review

**VERIFICATION** 

	mooto otanaara	
	Needs improvement	Sample of facility records reviewed Other (specify):
	Non-compliant	Sight confirmation by inspector
	Not reviewed	Verbal confirmation by facility staff
Comme	ents:	
		cords shall be kept in a secure area. Juvenile records shall be kept separate from adult records all manner in accordance with s. 938.396, Stats., and any other applicable federal or state law.
COMPL	LIANCE	VERIFICATION
$\boxtimes$	Meets standard	☐ Policy and procedure manual review ☐ Previous compliance documented
	Needs improvement	Sample of facility records reviewed Other (specify):
	Non-compliant	Sight confirmation by inspector
	Not reviewed	Verbal confirmation by facility staff

#### Comments:

**COMPLIANCE** 

 $\square$ 

### MAINTENANCE OF JAIL, SANITATION AND CARE OF PRISONERS

Wisconsin State Statute 302.37 Maintenance of jail and care of prisoners.

Wisconsin State Statute 302.37 (1) (a) The sheriff or other keeper of a jail shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners and shall cause the clothing of each prisoner to be properly laundered. The sheriff or keeper shall furnish each prisoner with clean water, towels and bedding. The sheriff or keeper shall serve each prisoner 3 times daily with enough well-cooked, wholesome food. The county board shall prescribe an adequate diet for the prisoners in the county jail.

Wisconsin State Statute 302.37(3)(a) The county or municipality shall furnish its jail with necessary bedding, clothing, toilet facilities, light and heat for prisoners

Wisconsin State Statute 302.37 (4) The sheriff or other keeper of a jail may use without compensation the labor of any prisoner sentenced to actual confinement in the county jail or, with the prisoner's consent, any other prisoner in the maintaining of and the housekeeping of the jail, including the property on which it stands. Any prisoner who escapes while working on the grounds outside the jail enclosure shall be punished as provided in s. 946.42.

- A daily inspection is conducted by jail staff of housekeeping, sanitation, and physical plant maintenance.
- The jail is constantly clean and in a healthful condition.
- Inmate areas are free of graffiti, posters, wall coverings, etching, etc.
- All surfaces, equipment, and facilities are clean and in good repair.
- Air handling systems, including ventilation screens and covers, are clean, unobstructed, and in good working order.
- Inmate personal property allowed in the housing units is subject to limitations on volume and content.
- Inmates are held accountable for making the beds, cleaning the floors, cleaning the common bathroom facilities, properly storing property, and maintaining cleanliness and order in the housing units daily.
- Inmates and staff are held accountable for housekeeping and sanitation deficiencies.
- Identified maintenance needs are addressed in a timely manner.
- Hallways are free of clutter and obstructions.

	Detention Facilities 44 (4/2015)				
COMPLIA		VER	IFICATION		
	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed	X	Other (specify):
	Non-compliant	$\boxtimes$	Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
propert 1) The 2) The	y defacing. A spot check of hor North Central cellblock needed washbasin in cell #1 (Max Righ	usir cle t) w	ail was in satisfactory condition. Then ag unit conditions and mechanical dev aning (addressed subsequent to the in as broken (addressed subsequent to of confinement was generally positive	ice nsp the	es revealed the following issues: pection).
	0.12 Sanitation and Hygiene. The jai		all have policies and procedures relating to an and in good repair.	o sa	anitation and hygiene.
COMPLIA	ANCE	VER	IFICATION		
	Meets standard	$\boxtimes$	Policy and procedure manual review	1	Previous compliance documented
	Needs improvement	Ħ		$\overline{A}$	Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
DOC 350	<ul><li>0.12 (2) Blankets shall be laundered</li><li>0.12 (3) Sheets, pillowcases and ma</li><li>0.12 (4) Clean towels shall be issued</li></ul>	attre	ss covers shall be changed and washed at	lea	ast weekly and before reissue.
COMPLIA	ANCE	VER	IFICATION		
$\boxtimes$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed	X	Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
once a	week, and towels/washcloths to	wice			•
shall be a clean a DOC 350 waterpro	covered with a fire retardant, water and sanitary condition. The sheriff s 0.12 (6) Suppliers of mattresses and pof, and easy to clean.	rpros shall I pill	where there is a need for overnight detent of, easy-to-sanitize material. Mattresses an provide adequate bedding. Mattresses shows shall be provide evidence to the sherif	d p all	pillows shall be kept in good repair and in be cleaned and sanitized before reissue.
DOC 350	0.12 (7) Mattresses shall be of propo	er si	ze to fit the bed.		
COMPLIA	ANCE	VER	IFICATION		
$\overline{\boxtimes}$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	X	Other (specify):
	Needs improvement Non-compliant		Sample of facility records reviewed Sight confirmation by inspector	X	Other (specify):
	•		• •		Other (specify):

CO 1 45	NAMOE	\/	DIFICATION		
	PLIANCE Mosts standard		RIFICATION		Draviaus compliance decumented
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant  Not reviewed		Sight confirmation by inspector		
			Verbal confirmation by facility staff		
Comm	nents: Necessary clothing is	provided	at intake.		
DOC :		all be esta	ablished to meet daily needs. All issue	d and a	allowed clothing items are laundered to
COMF	PLIANCE	VEF	RIFICATION		
$\boxtimes$	Meets standard	$\square$	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		Cariot (opcomy).
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
Comm	ents: Staff and inmates repo	orted clot	hing is laundered twice a week.		
			9		
amo					
	PLIANCE		separately from food and kitchenware	in a loc	. Red area not accessible to iniliates.
COMF	PLIANCE	VEF	RIFICATION		
_	PLIANCE Meets standard		RIFICATION  Policy and procedure manual review		Previous compliance documented
COMF	PLIANCE	VEF	Policy and procedure manual review Sample of facility records reviewed		
COMF	PLIANCE  Meets standard  Needs improvement	VEF	RIFICATION  Policy and procedure manual review		Previous compliance documented
COMF	PLIANCE  Meets standard  Needs improvement  Non-compliant  Not reviewed	VEF	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector		Previous compliance documented
COMF	Meets standard Needs improvement Non-compliant Not reviewed nents: It was reported the factors 350.12 (11) After 24 hours, inmaygiene, including toothpaste and ovided to inmates upon request	VEF	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff	es suff	Previous compliance documented Other (specify):  ficient for the maintenance of cleanline materials for females and toilet paper s
COMP Comm Comm DOC: and h be pro mater	Meets standard Needs improvement Non-compliant Not reviewed nents: It was reported the factors 350.12 (11) After 24 hours, inmaygiene, including toothpaste and ovided to inmates upon request	VEF	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff racts with Orkin for pest control. be provided with towels and toilet articlush, soap and comb. Basic feminine hy	es suff	Previous compliance documented Other (specify):  ficient for the maintenance of cleanline materials for females and toilet paper s
COMP Comm Comm DOC: and h be pro mater	Meets standard Needs improvement Non-compliant Not reviewed ments: It was reported the face 350.12 (11) After 24 hours, inmaygiene, including toothpaste and ovided to inmates upon requestials.	VEF	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff racts with Orkin for pest control. be provided with towels and toilet articlush, soap and comb. Basic feminine hy all be no common use of toothbrushes	es suff	Previous compliance documented Other (specify):  ficient for the maintenance of cleanline materials for females and toilet paper s
COMP	Meets standard Needs improvement Non-compliant Not reviewed nents: It was reported the factors 350.12 (11) After 24 hours, inmany giene, including toothpaste and ovided to inmates upon requestials. PLIANCE	VEF	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff racts with Orkin for pest control.  be provided with towels and toilet articlush, soap and comb. Basic feminine hy all be no common use of toothbrushes  RIFICATION  Policy and procedure manual review Sample of facility records reviewed	es suff	Previous compliance documented Other (specify):  ficient for the maintenance of cleanline materials for females and toilet paper s, shaving materials or feminine hygien
COMP	Meets standard Needs improvement Non-compliant Not reviewed nents: It was reported the face  850.12 (11) After 24 hours, inmaygiene, including toothpaste and ovided to inmates upon requestials.  PLIANCE Meets standard Needs improvement Non-compliant	VEF	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff racts with Orkin for pest control.  be provided with towels and toilet articlush, soap and comb. Basic feminine hy all be no common use of toothbrushes  RIFICATION  Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector	es suff	Previous compliance documented Other (specify):  ficient for the maintenance of cleanline materials for females and toilet paper s s, shaving materials or feminine hygien  Previous compliance documented
COMP	Meets standard Needs improvement Non-compliant Not reviewed nents: It was reported the face 350.12 (11) After 24 hours, inmaygiene, including toothpaste and analysis of the standard Needs standard Needs improvement	VEF	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff racts with Orkin for pest control.  be provided with towels and toilet articlush, soap and comb. Basic feminine hy all be no common use of toothbrushes  RIFICATION  Policy and procedure manual review Sample of facility records reviewed	es suff	Previous compliance documented Other (specify):  ficient for the maintenance of cleanline materials for females and toilet paper s s, shaving materials or feminine hygien  Previous compliance documented
COMP Comm Comm Comm Comp Comm Comp Comp Comp	Meets standard Needs improvement Non-compliant Not reviewed nents: It was reported the face 350.12 (11) After 24 hours, inmaygiene, including toothpaste and ovided to inmates upon requestials.  PLIANCE Meets standard Needs improvement Non-compliant Not reviewed	VEF	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff racts with Orkin for pest control.  be provided with towels and toilet articlush, soap and comb. Basic feminine hy all be no common use of toothbrushes  RIFICATION  Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector	es suff	Previous compliance documented Other (specify):  ficient for the maintenance of cleanline materials for females and toilet paper s s, shaving materials or feminine hygien  Previous compliance documented
COMF  Comm	Meets standard Needs improvement Non-compliant Not reviewed nents: It was reported the face  850.12 (11) After 24 hours, inmaying including toothpaste an ovided to inmates upon request ials.  PLIANCE Meets standard Needs improvement Non-compliant Not reviewed nents:	VEF	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff racts with Orkin for pest control.  be provided with towels and toilet articlush, soap and comb. Basic feminine hy all be no common use of toothbrushes  RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff	es suffgiene n	Previous compliance documented Other (specify):  ficient for the maintenance of cleanline materials for females and toilet paper s, shaving materials or feminine hygien  Previous compliance documented Other (specify):
COMP Comm DOC: and h be pro mater COMF Comm Comm	Meets standard Needs improvement Non-compliant Not reviewed nents: It was reported the face 350.12 (11) After 24 hours, inmaying including toothpaste an ovided to inmates upon requestials. PLIANCE Meets standard Needs improvement Non-compliant Not reviewed nents: 350.12 (12) Inmates are provide	VEF  illity contractes shall d toothbru. There sh	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff racts with Orkin for pest control.  be provided with towels and toilet articlush, soap and comb. Basic feminine hy all be no common use of toothbrushes  RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff	es suffgiene n	Previous compliance documented Other (specify):  ficient for the maintenance of cleanline materials for females and toilet paper s, shaving materials or feminine hygien  Previous compliance documented Other (specify):
COMP Comm DOC: and h be pro mater COMF Comm Comm	Meets standard Needs improvement Non-compliant Not reviewed nents: It was reported the face 350.12 (11) After 24 hours, inmaygiene, including toothpaste an ovided to inmates upon requestials. PLIANCE Meets standard Needs improvement Non-compliant Not reviewed nents: 350.12 (12) Inmates are provide used for passing meals or othe	VEF  illity contractes shall d toothbru. There sh	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff racts with Orkin for pest control.  be provided with towels and toilet articlush, soap and comb. Basic feminine hy all be no common use of toothbrushes  RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff  g materials daily. Tables used for commall be kept sanitized.	es suffgiene n	Previous compliance documented Other (specify):  ficient for the maintenance of cleanline materials for females and toilet paper s, shaving materials or feminine hygien  Previous compliance documented Other (specify):
COMF  Comm  Comm	Meets standard Needs improvement Non-compliant Not reviewed nents: It was reported the face  850.12 (11) After 24 hours, inmaying including toothpaste and evided to inmates upon requestials.  PLIANCE Meets standard Needs improvement Non-compliant Not reviewed nents:  850.12 (12) Inmates are provide used for passing meals or othe	VEF	RIFICATION  Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff racts with Orkin for pest control.  be provided with towels and toilet articlesh, soap and comb. Basic feminine hy all be no common use of toothbrushes  RIFICATION  Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff  g materials daily. Tables used for commall be kept sanitized.  RIFICATION	es suffgiene n	Previous compliance documented Other (specify):  ficient for the maintenance of cleanline materials for females and toilet paper s, shaving materials or feminine hygier  Previous compliance documented Other (specify):  e and meals shall be kept sanitized. December 1.50 per previous compliance documented
COMF  Comm  Comm	Meets standard Needs improvement Non-compliant Not reviewed Ments: It was reported the factorists in t	VEF	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff racts with Orkin for pest control.  be provided with towels and toilet articlesh, soap and comb. Basic feminine hy all be no common use of toothbrushes  RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff  g materials daily. Tables used for commall be kept sanitized.  RIFICATION Policy and procedure manual review	es suffgiene na combi	Previous compliance documented Other (specify):  ficient for the maintenance of cleanline materials for females and toilet paper s s, shaving materials or feminine hygien  Previous compliance documented Other (specify):  e and meals shall be kept sanitized. December of the previous compliance documented  Previous compliance documented

DO	OC-2744 (4/2015)			
DOC	C 350.12 (13) Safety and sanitation insp	ect	ions of the jail are completed and documente	d at a minimum of once monthly.
CON	MPLIANCE	VEI	RIFICATION	
	Meets standard	X	Policy and procedure manual review	Previous compliance documented
Ī	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed	Other (specify):
ī	Non-compliant	Ī	Sight confirmation by inspector	
Ī	Not reviewed	$\overline{X}$	Verbal confirmation by facility staff	
ens	sure the date of the inspection is on	ea		
			are disinfected and cleaned before reissue a	nd are stored in a secure area.
		VE	RIFICATION	
	Meets standard	$\boxtimes$	Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed		Verbal confirmation by facility staff	
	c 350.12 (15) Property storage containe  Property storage containers may inclu			
CON			RIFICATION	
	Meets standard	X	Policy and procedure manual review	Previous compliance documented
Ī	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	de la company.
Ī	Not reviewed	$\overline{X}$	Verbal confirmation by facility staff	
Com	nments:		, , , , , , , , , , , , , , , , , , , ,	
DOC	C 350.12 (16) Trash is removed daily fro	m a	all dayrooms.	
COV	MPLIANCE	VE	RIFICATION	
	Meets standard	$\boxtimes$	Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant	$\times$	Sight confirmation by inspector	
	Not reviewed		Verbal confirmation by facility staff	
Com	nments:			
			posed of according to government regulation	ns.
		VEI	RIFICATION	
	Meets standard	$\boxtimes$	Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed		Verbal confirmation by facility staff	

Comments:

INMATE SERVICES

DOC-2744 (4/2015)

INMATE SERVICES

DOC 350.26 Grievance Process. The jail shall have policies and procedures relating to an inmate grievance process and ensure it is available to all inmates and includes at least one level of appeal.

COMPLIANCE

VERIFICATION

Meets standard

Policy and procedure manual review

Previous compliance documented

Needs improvement

Sample of facility records reviewed

Other (specify):

Non-compliant

Sight confirmation by inspector

$\boxtimes$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comm	ents: Policy #609 addresses	the griev	vance process.		
	350.27 Legal Access. The jail s materials.	hall have	policies and procedures to address inm	ates	' access to the courts, their attorneys, and
COMP	LIANCE	VER	IFICATION		
$\square$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	$\boxtimes$	Other (specify):
	Non-compliant	$\boxtimes$	Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Comm	ents: Policies #603, #1007, #	‡1008, aı	nd #1010 address legal access.		
DOC 3		alth care,	ns and procedures to define indigence.  programming and essential services is I	not p	recluded by inability to pay.
	Meets standard		Policy and procedure manual review	_	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	_	Other (specify):
ᆸ	Non-compliant		Sight confirmation by inspector		Guier (Specify).
一一	Not reviewed		Verbal confirmation by facility staff		
Comm		3, and #7	32.1 address inmate indigence.		
	350.29 Mail. The jail shall have eys, the court system, government			act b	etween inmates and their families, friends,
DOC 3	50.29 (1) Provision for staff ins	pection a	nd reading of non-privileged incoming a	nd o	utgoing mail.
•	Staff demonstrate a working know	owledge of	the procedures for mail inspection.		
DOC 3	50.29 (2) Provision for the limit	ed inspec	tion of incoming and outgoing privileged	d ma	il.
	Staff demonstrate a working know	owledge of	the definition of privileged mail and the pro	cedu	res for inspecting it.
COMP	LIANCE	VER	IFICATION		
$\square$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented

Comments: Policy #1008 addresses inmate mail. Mail procedures are explained in the inmate rules.

Sample of facility records reviewed

Verbal confirmation by facility staff

Sight confirmation by inspector

Needs improvement

Non-compliant
Not reviewed

Other (specify):

DOC 350.29 (3) Delivery of all non-privileged	d ar	nd approved privileged incoming mail.					
<ul> <li>Inmate mail is delivered to inmates in a</li> </ul>	Inmate mail is delivered to inmates in a timely manner.						
COMPLIANCE V	VER	IFICATION					
Meets standard	$\boxtimes$	Policy and procedure manual review	П	Previous compliance documented			
Needs improvement		Sample of facility records reviewed	$\overline{X}$	Other (specify):			
Non-compliant	Ħ	Sight confirmation by inspector		o m.o. (opcomy).			
Not reviewed	Ħ	Verbal confirmation by facility staff		_			
Comments:		, , , ,					
DOC 350.29 (4) Inventory and disposition of	f co	ntraband items found in mail.					
<ul> <li>Contraband items are inventoried and</li> </ul>	doc	numented					
<ul> <li>Contraband items are inventoried and</li> <li>Contraband is promptly turned over to</li> </ul>							
		IFICATION					
Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented			
Needs improvement	Ħ	Sample of facility records reviewed	Ħ	Other (specify):			
Non-compliant	Ħ	Sight confirmation by inspector					
Not reviewed	Ħ	Verbal confirmation by facility staff		_			
Comments:	<u> </u>						
Comments.							
DOC 350.29 (5) Provision of postage to indig	iden	t inmates					
200 000.23 (0) 1 Tovision of postage to mark	ger	i illiates.					
COMPLIANCE V	VER	IFICATION					
Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented			
Needs improvement		Sample of facility records reviewed		Other (specify):			
Non-compliant [		Sight confirmation by inspector					
Not reviewed		Verbal confirmation by facility staff					
Comments:							
DO0 050 00 (0) D							
DOC 350.29 (6) Provision for notifying inmat	ites	when outgoing or incoming mail is withne	ıa.				
<ul> <li>A non-delivery of mail form is complete</li> </ul>	ed a	and provided to the inmate when mail is confis	cate	ed, destroyed, or rejected.			
		IFICATION					
	$\boxtimes$	Policy and procedure manual review		Previous compliance documented			
Needs improvement	Ħ	Sample of facility records reviewed	Ħ	Other (specify):			
Non-compliant	Ħ	Sight confirmation by inspector	<u> </u>	Other (Specify).			
Not reviewed	Ħ	Verbal confirmation by facility staff					
Comments:	<u> </u>	versal communication by facility stain					
Comments.							
DOC 350.30 Visitation. The jail shall have po	olio	ies and procedures relating to visitation.					
DOC 350.30 (1) Establishment of a visiting s	sch	edule for family, friends, attorneys, and ot	her	s. Attorney visits shall be allowed during			
reasonable hours, as long as security and da							
DOC 350.30 (2) Establishment of procedures	s fo	or requesting visitation during nonschedule	ed t	imes.			
<ul> <li>Accommodations are made for visits to occur at times other than scheduled visiting times.</li> </ul>							

		744 (4/2015)				
CON	/IPL	IANCE V	/ER	IFICATION		
	$\overline{d}$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
		Needs improvement	$\boxtimes$	Sample of facility records reviewed	X	Other (specify):
		Non-compliant	$\overline{\boxtimes}$	Sight confirmation by inspector		
		Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Com	me	nts: Policy #1010 addresses inn	nat	e visitation. Visitation is held twice	a	week on Wednesdays/Sundays and
pro	cec	dures are explained in the jail ru	iles	. Inmates are generally allowed to	/isi	t both days in 15-minute increments
per	vis	sitor (up to 5 different visitors ea	ch	day). Visits are conducted through i	nor	n-contact booths. Per policy, special
visit	s r	nay be granted under certain cor	ndi	tions.		
DOC	35	0.30 (3) Documentation of all visits t	hro	ugh a visitor log or register.		
		All : 11 . (f		The state of the s		
	•	<u> </u>		il are documented on the visitor's log or other	ар	propriate register.
		IANCE V	/ER	IFICATION		
		Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	<u> </u>	Needs improvement	Щ	Sample of facility records reviewed		Other (specify):
		Non-compliant	<u>Ц</u>	Sight confirmation by inspector		
		Not reviewed		Verbal confirmation by facility staff		
Com	me	nts:				
D00	\ <u> </u>	(0.00/4) Fatablishman of a same w	- 1! -			
DOC	, 33	60.30 (4) Establishment of a search p	OIIC	y or visitors and their possessions.		
		Personal contact visitors are subject to	as	search procedure.		
	•	Program workers and volunteers are s		ect to strict guidelines regarding personal item	s, c	carry-in equipment and compliance with jail
	_	policies.		/		wastianal avastiana limitian asum, in itama and
	•	may be subject to search.	ons	Legal visitors are required to adhere to safe	COH	rectional practices limiting carry-in items and
	•	Jail staff consistently apply visitation a	nd s	search standards to all non-jail staff.		
COV	/IPL	IANCE V	/ER	IFICATION		
	$\leq$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
		Needs improvement		Sample of facility records reviewed		Other (specify):
		Non-compliant		Sight confirmation by inspector		
		Not reviewed		Verbal confirmation by facility staff		
Com	me	nts:				
			es a	and procedures, including visitation sched	lule	e, in a place readily accessible to visitors
and	inn	nates.				
CON	/IPL	IANCE V	/ER	IFICATION		
	$\overline{\langle}$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Ī	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed	Ī	Other (specify):
		Non-compliant		Sight confirmation by inspector		
		Not reviewed		Verbal confirmation by facility staff		
Com	me	nts: The visitation schedule is po	ste	d in the inmate rules, public lobby, an	d c	department website.
DOC	35	0.30 (6) Establishment of a search p	olic	y for inmates before and after each visit.		
			_	IFICATION	_	
	<u> </u>	Meets standard	$\underline{\underline{M}}$	Policy and procedure manual review	_	Previous compliance documented
	<u> </u>	Needs improvement	<u> </u>	Sample of facility records reviewed		Other (specify):
<u> </u>	<u> </u>	Non-compliant	<u> </u>	Sight confirmation by inspector		
L		Not reviewed	Ш	Verbal confirmation by facility staff		
Com	me	nts:				

DOC 350.31 Programs services.	s and services. The jail	shall have policies and procedures relation	ng to the provision of inmate programs and
DOC 350.31 (1) Use of	community resources, c	ontract providers, and volunteers authoriz	ed by the sheriff.
DOC 350.31 (2) Notific	ation to inmates of availa	ability, eligibility, and schedules.	
DOC 350.31 (3) Condu	cting criminal backgrour	nd checks on all volunteers, community res	sources, and contract providers.
DOC 350.31 (4) Orienta	ation and training on faci	lity operations for all volunteers.	
	cational programming fo		ge consistent with the requirements of the
COMPLIANCE	VER	IFICATION	
Meets standa	rd 🔲	Policy and procedure manual review	Previous compliance documented
Needs improv	rement	Sample of facility records reviewed	Other (specify):
Non-complian	t	Sight confirmation by inspector	
Not reviewed	$\boxtimes$	Verbal confirmation by facility staff	
Comments: Policies #	310.2 and #506.8 add	dress these standards.	
with existing state and DOC 350.32 (1) Identification DOC 350.32 (2) Notification in the control of the control	federal statutes. The jaid ication of religious organisation to inmates of the se	I shall have policies and procedures relating izations and clergy willing to conduct religonerable in the check of religious services available in the check of the check	ious services in the facility.
<ul> <li>Staff demonstra</li> </ul>	ate a knowledge of the pro	cedure for assessing and responding to inmat	e requests for religious services.
COMPLIANCE	VER	RIFICATION	
Meets standa	rd 🔀	Policy and procedure manual review	Previous compliance documented
Needs improv	rement 🔀	Sample of facility records reviewed	Other (specify):
Non-complian	t	Sight confirmation by inspector	
Not reviewed	$\boxtimes$	Verbal confirmation by facility staff	
	#310.2 and #1013 ad nsultations can also be	<b>.</b>	e is a weekly nondenominational Bible
	_	that may be kept on an inmate's person or s are consistently applied throughout the jail.	in the cell.
COMPLIANCE	VER	RIFICATION	
Meets standa		Policy and procedure manual review	Previous compliance documented
Needs improv		Sample of facility records reviewed	Other (specify):
Non-complian	t <u></u>	Sight confirmation by inspector	
Not reviewed		Verbal confirmation by facility staff	
Comments:			
. ,		nd checks on members of a religious organ	ization and clergy.
COMPLIANCE		RIFICATION	
Meets standa		Policy and procedure manual review	Previous compliance documented
Needs improv		Sample of facility records reviewed	Other (specify):
Non-complian		Sight confirmation by inspector	
Not reviewed		Verbal confirmation by facility staff	
Comments:			

**DEPARTMENT OF CORRECTIONS WISCONSIN** Office of Detention Facilities DOC-2744 (4/2015) DOC 350.32 (5) Orientation and training on facility operations for all volunteers. Documentation of the orientation and volunteer agreement is on file. **COMPLIANCE VERIFICATION** Previous compliance documented Meets standard Policy and procedure manual review Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: DOC 350.33 Recreation. The jail shall have policies and procedures relating to recreation. DOC 350.33 (1) Identification of the recreational activities that are available. DOC 350.33 (2) Schedule of recreational activities. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Verbal confirmation by facility staff Not reviewed Comments: Policy #1004 addresses inmate recreation. Recreation is limited to dayroom activities. DOC 350.33 (3) When and where available, at least one hour of daily exercise and recreation is outside the cell or outdoors. **VERIFICATION COMPLIANCE** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: DOC 350.34 Publications. The jail shall have policies and procedures relating to access to publications. DOC 350.34 (1) Provision of publications of general interest for inmates such as books, newspapers and magazines. DOC 350.34 (2) Identification of publications that are prohibited for inmates because their content creates a security risk. Reading material restrictions are posted or otherwise accessible to inmates. DOC 350.34 (3) Inspection of publications brought by visitors for inmates if the jail allows visitors to bring in reading materials. There are limitations on the volume of personal reading materials that can be kept in the housing area, and these limitations are enforced consistently throughout the jail. All reading materials allowed to be brought in by visitors are subject to search. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented

Sample of facility records reviewed

Verbal confirmation by facility staff Comments: Policy #1007 addresses publications. Inmates are allowed access to a well-maintained library twice a week.

Sight confirmation by inspector

Needs improvement

Non-compliant

Not reviewed

Other (specify):

DOC-21	44 (4/2013)				
	0.35 Canteen. The jail shal for inmates.	I have polic	ies and procedures for the establishme	ent an	d use of canteen, vending or other similar
DOC 350	0.35 (1) Canteen shall be ma	ade available	e to eligible inmates.		
DOC 350	0.35 (2) Access to canteen r	may be restr	icted by the facility based upon inmate	class	ification or status.
COMPLI	ANCE	VER	IFICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	$\boxtimes$	Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
			e commissary. Canteen is provi ssary procedures are outlined in th		by Stellar Services and inmates are rules).
			FOOD SERVICE		
			and quality food for all inmates.	compl	leted and maintained in the facility files.
COMPLI	ANCE	VER	IFICATION		
$\square$	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed	$\boxtimes$	Other (specify):
	Non-compliant	$\boxtimes$	Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Registe	through every four (4) wered Dietician (Crowley,	eeks. The MPH, RD, on of all full-	menu, which provides an average LDN, #952060) verifying that it is r	of 28	by of the food service menu which is 800 calories per day, was signed by a conally appropriate.  qualified, independent outside source
	-		•		
COMPLI			IFICATION		Description of the second of t
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement Non-compliant		Sample of facility records reviewed Sight confirmation by inspector		Other (specify):
-	Not reviewed	⊢	Verbal confirmation by fracility staff		
		amilaa kita		20110	ty Health Department on 40/24/40
Commer	ts: An inspection of the s	service kitc	nen was completed by the Grant C	Joun	ty Health Department on 10/21/16.
DOC 350	0.11 (4) Internal monthly ins	pection of t	he food service area is completed and	docur	mented.
COMPLI	ANCE	VER	IFICATION		
$\underline{\underline{\square}}$	Meets standard		Policy and procedure manual review		Previous compliance documented
_ 닏_	Needs improvement		Sample of facility records reviewed		Other (specify):
<u> </u>	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Commer	ts: A spot check of recor	ds verified	compliance.		

DOC-2744 (4/2015) DOC 350.11 (5) The kitchen area and all equipment are maintained in a sanitary condition. Routine inspections are completed and documented. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: DOC 350.11 (6) Three nutritious meals are provided daily, two of which are hot. Variations may be allowed based on weekend and holiday food service demands, provided basic nutritional goals are met. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: DOC 350.11 (7) Food temperatures are properly maintained. Documentation of daily food preparation temperatures is maintained. Documentation of periodic serving temperature readings is maintained. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Food temperatures are checked prior to leaving Vernon County and once more at Crawford County. DOC 350.11 (8) Food items are stored appropriately at least 6 inches off the floor. Opened food packages are stored in airtight containers that are labeled and dated. Food items are stored in appropriate locations and temperatures. Documentation of daily cooler and freezer temperatures is maintained. COMPLIANCE **VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Refrigerator temperatures are checked and documented daily. DOC 350.11 (9) Special diets are provided as prescribed by a qualified health care professional. Documentation of special diet orders is maintained. **COMPLIANCE** VERIFICATION Policy and procedure manual review Previous compliance documented Meets standard Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff

Comments:

	provide a substitute from other avai		any foods that violate the inmate's religion. e foods from the menu served at the meal		
COMP	LIANCE	VEF	RIFICATION		
	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement	Ħ	Sample of facility records reviewed		Other (specify):
一百	Non-compliant	Ħ	Sight confirmation by inspector		Circle (opening).
$ \Box$	Not reviewed	Ħ	Verbal confirmation by facility staff		
Comm	ents:				
DOC 3 as a fo	m. 50.11 (12) No person who is known ood handler in a facility. 50.11 (13) All persons who work in f	to b	chen who prepare or serve food shall bath e infected with any illnesses transmittable l service areas shall wear clean garments ar nandling of food, drink, utensils or equipme	by nd	food or utensils may be employed or work clean caps or hairnets and shall keep their
	ng of the fingernails.	ine i	ianuming of 100d, driffik, dtensils of equipme	em	i. Farticular attention shall be given to the
	LIANCE	VEF	RIFICATION		
$\square$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comm	ents:				
	50.11 (14) Inmate workers are provided Documentation of orientation and tra	ining	orientation and training prior to assignment is maintained.  RIFICATION	t ir	n the kitchen area.
	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement	Ħ	Sample of facility records reviewed		Other (specify):
一百	Non-compliant	Ħ	Sight confirmation by inspector		Suiter (openity).
一百	Not reviewed	Ħ	Verbal confirmation by facility staff		
Comm					
			d throughout all aspects of food preparatio	n a	and service.
	LIANCE	VEF	RIFICATION		
$\underline{}$	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
<u>_</u> _	Needs improvement	<u> </u>	Sample of facility records reviewed		Other (specify):
	Non-compliant	$\perp$	Sight confirmation by inspector		
$\Box$	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Comm	ents:				
DOC 3	50.11 (16) Food and drink shall be p	rote	cted from contamination. Meals are covere	ed (	during transit to and within the facility.
COMP	LIANCE	VEF	RIFICATION	_	
	Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant	$\boxtimes$	Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comm	ents:				

Office of Detention Facilities DOC-2744 (4/2015)

DOO-2744 (4/2013)					
DOC 350.11 (17) Kitchen food storage and	disł	washing equipment temperatures are rou	tine	ely monitored and documented.	
COMPLIANCE	VEF	RIFICATION			
Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented	
Needs improvement		Sample of facility records reviewed		Other (specify):	
Non-compliant		Sight confirmation by inspector			
Not reviewed		Verbal confirmation by facility staff			
Comments:					
DOC 350.11 (18) Garbage containers are co	ver	ed, emptied daily, and are kept clean.			
COMPLIANCE	VEF	RIFICATION			
Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented	
Needs improvement		Sample of facility records reviewed		Other (specify):	
Non-compliant		Sight confirmation by inspector			
Not reviewed		Verbal confirmation by facility staff			
Comments:					
DOC 350.11 (19) Cleaning agents are store	d se	parately from food service items.			
COMPLIANCE	VFF	RIFICATION			
Meets standard	$\frac{1}{\square}$	Policy and procedure manual review	$\Box$	Previous compliance documented	
Needs improvement	$\frac{\square}{\square}$	Sample of facility records reviewed	H	Other (specify):	
Non-compliant	H	Sight confirmation by inspector	<u> </u>	Other (specify).	
Not reviewed	Ħ	Verbal confirmation by facility staff			
Comments:	ш	versus committation by facility cian			
Comments.					
DOC 350.11 (20) A security procedure is in	pla	ce to control and account for sharps, tools	an	d utensils at all times.	
. ,	•				
<ul> <li>Documentation of daily control and inventory is maintained.</li> </ul>					
COMPLIANCE	VEF	RIFICATION			
Meets standard	$\boxtimes$	Policy and procedure manual review		Previous compliance documented	
Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):	
Non-compliant		Sight confirmation by inspector			
Not reviewed					
Comments:					